



**Schmieding /ILC Solutions Forum on Elder Caregiving**

June 2, 2005 ♦ 9 am -12 noon

**Schmieding Conference on Elder Homecare**

June 2, 2005 ♦ 12 noon - 4 pm

# REPORT OF FINDINGS

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W. STEVEN CARTER

ELDER CAREGIVING:  
A RENEWED FAITH-BASED EMPHASIS

# FAITH-BASED ELDER CAREGIVING

## SOLUTIONS FOR KEEPING ELDERS AT HOME FOR LIFE

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### TESTIMONY OF W. STEVEN CARTER

#### TO THE POLICY COMMITTEE OF THE WHITE HOUSE CONFERENCE ON AGING ELDER CAREGIVING

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Mr. Blacato, Mr. Fong, Chair Person and Members of the White House Conference on Aging Policy Committee,

My name is W. Steven Carter. I represent the faith-based component of the Schmieding Center for Senior Health and Education's (SCSHE) *Extended Family Elder Care Project* and Fellowship Bible Church of Northwest Arkansas (FBC), where I serve as Chief Financial Officer. I had the privilege of working with elder health issues in the 1990s as we developed geriatric cardiac rehabilitation, healthy lifestyles, and psychiatric inpatient and outpatient programs in Benton County, Arkansas. I have also been privileged to work with elder ministries at FBC and other churches. Finally, I have personally experienced the joys and frustrations of caring for elders at home with great grandparents, grandparents and parents.

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### SUMMARY OF FINDINGS

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Prior panelists have identified and evaluated needed improvements in the provision of home elder care, alternative definitions of "home", federal and state regulatory and funding roadblocks, and appropriate delivery mechanisms for in-home education and healthcare.

This testimony assumes consensus for a collaborative approach to home elder care that takes a holistic view of the person. We must address the spiritual needs of elders at home as well as their physical, emotional, sociological, and psychological needs. To do less is to devalue the person.

General observations about elder care<sup>1</sup> can be summarized as follows:

- The "Greatest Generation" needs home elder care now.
- The "Boomer Generation" will need home elder care over the next two decades.
- Most elder caregivers are spouses or other family members who have no training and who receive little to no respite support.
- Families are fragmented, both personally and geographically, making family-based home care increasingly difficult.
- Most communities lack coordination and cooperation to provide for home elder care. A central contact point rarely exists and awareness of, and access to, existing home elder care services is limited.

Specific observations regarding *faith-based* support of home elder care<sup>2</sup> include:

- No cohesive theology of aging exists to define values and roles of elders and those caring for and responding to them.
- Historical roles (practical helps ministries) have declined dramatically.
- Substantive home elder care ministry emphases are fragmented and scarce.
- Virtually no training and support structures exist.
- Private funding is essentially non-existent.

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## RECOMMENDATIONS AND REFORMS

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Three major areas emerge for policy recommendations and reform: developing a theology of aging, engaging elders in the home elder care solution and activating faith-based participation in home elder care.

### Developing a Theology of Aging

We must develop and adopt a cohesive theology of aging<sup>2</sup> to appropriately define, give direction to and provide a framework for developing policies for home elder care. Key definitional issues include the value of elders, the value of their experience and wisdom, and society's responsibility regarding the support and provision of elder care. Illustrative passages from the Old Testament<sup>3</sup> address the issue of elder value:

“You shall rise up before the grayheaded, and honor the aged.” [Leviticus 19:32]

“A gray head is a crown of glory.” [Proverb 16:31]

The challenge of developing a cohesive theology of aging is not as daunting as it might first appear. FBC is working with other faith-based organizations in the collaborative SCSHE *Extended Family Elder Care Project*. We have discovered that shared biblical values regarding elders and their care override potentially divisive doctrinal issues.

This approach also aligns with the call to adopt a manifesto advocating the protection of human rights and freedoms of older persons at home presented at the United Nations World Assembly on Aging<sup>4</sup> in Madrid, Spain.

The benefits of this pursuit certainly exceed the potential difficulties of this crucial definitional process. We must be realistic in accepting “the fault lies not in our aging, but in the denial of aging.”<sup>5</sup>

### Engaging Elders in the Solution

Robert N. Butler, M.D. called for the expansion of the cultural and economic roles of older persons in order to utilize their experience and wisdom<sup>4</sup>. This position is also advocated by William H. Thomas, M.D., who used the aging classification *senescence* to describe the period of fruitful “being-doing” elder activity.<sup>5</sup>

FBC is working to marshal our senescent adults to serve elders at home in the spirit of the following biblical<sup>3</sup> potentials:

“We came to the grave in full vigor, like the stacking of grain in its season.” [Job 5:26]

“They will still yield fruit in old age, they shall be full of sap and very green.” [Psalm 92:14]

We believe following the lead of organizations like SCORE®, which has demonstrated success in deploying senescent adults to counsel and assist entrepreneurs and business owners, is both appropriate and necessary for elder home care to become a sustained reality.

### **Activating Faith-Based Participation**

Finally, we must rally the faith-based community to assume significant leadership roles in the design and delivery of effective home elder care, including:

- Support of respite elder care, rural care circles and other volunteer-based programs designed to assist families and other caregivers.
- Development of local and regional centers to train, support and counsel those assisting with elder care at home. Churches and other faith-based organizations generally already have the resources to mobilize and staff such efforts.
- Development of funding resources through foundations or other mechanisms to support noted activities. Endowment funding must be developed for true long-term viability. Senescent adults control the most significant wealth transfer in history. We must channel these assets to support recommended initiatives and relieve the financial burden of government and other publicly-supported funding agencies.
- Coordination with other support and counseling organizations (Stephen Ministries®, local church and other counseling centers) to ensure appropriate recognition of and response to spiritual, emotional and psychological needs of elders and caregivers.
- Implementation of a “Seniors in Ministry” approach like the one emerging at FBC which engages the experience and fruitfulness of senescence adults.

In conclusion, we urge the White House Conference on Aging to adopt a holistic approach to elder caregiving in its final recommendations. The SCSHE’s *Extended Family Elder Care Project* provides an effective model with a significant faith-based component. We believe this approach will best serve the needs of aging Americans as we face our age boom together.

I would like to thank the policy committee for the opportunity to testify and will be happy to answer any questions.

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## NOTES

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<sup>1</sup> SCSHE, *Realities of Long-Term Care in America*, 2005

<sup>2</sup> This testimony assumes a Judeo-Christian world view for establishing definitions and values. Other faith-based organizations are certainly encouraged to participate in community and faith-based initiatives like the model proposed by SCSHE.

<sup>3</sup> New American Standard Bible, Holman

<sup>4</sup> Butler, Robert N., M.D., *Declaration of the Rights of Older Persons*, International Longevity Center – USA, 2002

<sup>5</sup> Thomas, William H., M.D., *What are Old People For*, 2004 Vanderwyk & Burnham